

POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Application Number</td> <td>10/804,314</td> </tr> <tr> <td>Filing Date</td> <td>03-19-2004</td> </tr> <tr> <td>First Named Inventor</td> <td>Matthijs H. Keuper</td> </tr> <tr> <td>Title</td> <td>POLARIZED SEMICONDUCTOR LIGHT</td> </tr> <tr> <td>Art Unit</td> <td>2826</td> </tr> <tr> <td>Examiner Name</td> <td>DICKEY, THOMAS L</td> </tr> <tr> <td>Attorney Docket Number</td> <td>LUM-03-06-09 US</td> </tr> </table>	Application Number	10/804,314	Filing Date	03-19-2004	First Named Inventor	Matthijs H. Keuper	Title	POLARIZED SEMICONDUCTOR LIGHT	Art Unit	2826	Examiner Name	DICKEY, THOMAS L	Attorney Docket Number	LUM-03-06-09 US
Application Number	10/804,314														
Filing Date	03-19-2004														
First Named Inventor	Matthijs H. Keuper														
Title	POLARIZED SEMICONDUCTOR LIGHT														
Art Unit	2826														
Examiner Name	DICKEY, THOMAS L														
Attorney Docket Number	LUM-03-06-09 US														

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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OR

☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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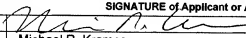
☐ Applicant/inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____.

SIGNATURE of Applicant or Assignee of Record

Signature		
Name	Michael R. Krames	Date
Title and Company	Vice President of Advanced Laboratories	Telephone
		(408)964-2687

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

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